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Bib Data Sheet

CONFIRMATION NO. 2484

SERIAL NUMBER 09/186,962	FILING DATE 11/05/1998  RULE	CLASS 382	GROUP ART UNIT 2621	ATTORNEY DOCKET NO. 4830-50848/W
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## APPLICANTS

GEOFFREY B. RHOADS, WEST LINN, OR;

\*\* CONTINUING DATA \*\*\*\*\* *AB*

THIS APPLICATION IS A CON OF 08/649,419 05/16/1996 PAT 5,862,260  
WHICH IS A CIP OF 08/637,531 04/25/1996 PAT 5,822,436  
AND A CIP OF 08/438,159 05/08/1995 PAT 5,850,481

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *Done*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/23/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 34	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>	

## ADDRESS

23735  
DIGIMARC CORPORATION  
19801 SW 72ND AVENUE  
SUITE 100  
TUALATIN, OR  
97062

## TITLE

METHOD FOR MONITORING INTERNET DISSEMINATION OF IMAGE, VIDEO AND/OR AUDIO FILES

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees ( Filing )
868	No. _____ for following:	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/186,962	11/05/98	382	2721	4830-50848/W

APPLICANT

GEOFFREY B. RHOADS, WEST LINN, OR.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED CB THIS APPLN IS A CON OF 08/649,419 05/16/96 PAT 5,862,260  
 WHICH IS A CIP OF 08/637,531 04/25/96 PAT 5,822,436  
 SAID 09/186,962 11/05/98  
 A CIP OF 08/438,159 05/08/95 PAT 5,850,481

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED CB NONE

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED CB NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/23/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OR	SHEETS DRAWING 34	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Initials <u>CB</u> Initials				

ADDRESS  
 Digimarc Corporation  
 19801 SW 72nd Avenue  
 Suite 250  
 Tualatin, OR 97062

TITLE  
 METHOD FOR MONITORING INTERNET DISSEMINATION OF IMAGE, VIDEO AND/OR AUDIO FILES

FILING FEE RECEIVED  \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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